

# **Exhibit L**

.DATE 02 APR 18 05:18:29 REPORT GENERATION JUDGEJOH

S U F F O L K C O U N T Y S H E R I F F

51410

CONTROL ROOM Discharge Notification

DATE : APRIL 2, 2018

TIME : 05:18 Hrs

PIN : 730466 BCI : Y4954 BPL : 815516 In-Date: 03/30/18 Time : 1523 Hrs  
FROM LOCATION: 1SW31

Name : HERNANDEZARGUETA,GERMAN

Address: [REDACTED] Apt#

City : [REDACTED] state [REDACTED] Zip [REDACTED]

DOB : [REDACTED] Age : 23 R : W E : H S : M Rel : CAT

DA Code: 5561 A/C: C Law: WAR Art/Sect: FOA Sub: C1: 000

Charge Description: FOA WARRANT

Holds : Y Bail/Sentence: FOA WARRANT Court/Docket/Warrant#: [REDACTED]

Class : AMWAR Admit Status : ENT By whom : INS Housed In From : NONE

Number of Admissions: Non Sentence : 004 Sentence : 000

POB : EL R/W : Y Ed. Level : 08 Social Rel : S Occup : LB status : FUL

D/R Date: 04/02/18 Code: DTA Auth: REC D/T: T Agcy: INS

..... END REPORT .....

# RECORDS COPY

SUFFOLK COUNTY CORRECTIONAL FACILITY - PRISONER RECEIPT  
PRISONER TRANSFER & DISCHARGE

8I410

Dated: 04/02/18

PIN Number: 730466

Prisoner: HERNANDEZARGUETA, GERMAN

DOB: [REDACTED]

Reason:

DISCHARGE TO AGENCY IMMIGRATION - A# [REDACTED]

Detainers/Holds:

Other items:

And all pertinent medical information.

Account Balance: 265.35

Check # 401373

Received by: [Signature]

Badge No. 1130

Printed Name: [Signature]

Location: YP3N002-

BCI: Y4954

NYSID: 13923315Q

Classification: AMWAR

FBI: 8NE7KJ06K

SSN: [REDACTED]

AS OF 03/30/18 DNA TEST REQUIRED BEFORE DISCHARGE

Personal: Height: 508 Weight: 135 Hair: BLK Eyes: BRO Age: 23  
Race: W Eth: H Sex: M Religion: CAT  
Marital Status: S Dependents: 00 Last Grade Completed: 08  
Birthplace: EL US Citizen: N Suffolk Res: N  
Scars Marks & Tattoos: NONE

Address: [REDACTED]

Emergency Contact: OMAR CASTENEDA

Phone: [REDACTED]

Relationship to defendant: COU

RECORD ROOM

Reason: DISCHARGE TO AGENCY

To: IMMIGRATION

Checked By [Signature]

Badge [Signature]

Sgts Approval [Signature]

Badge 5219



DEPARTMENT OF HOMELAND SECURITY  
IMMIGRATION DETAINER - NOTICE OF ACTION

Subject ID: 360770731  
Event #: 0001603001094

File No: [REDACTED]  
Date: March 10, 2018

TO: (Name and Title of Institution - OR Any Subsequent Law Enforcement Agency) SUTTER, CO, CORRE FAC  
100 CENTER DRIVE  
ALBANY, NY 12001

FROM: (Department of Homeland Security Office Address)  
ICE - Westchester, CA 93701  
ICE  
200 FERGUSON STREET  
SACRAMENTO, CA 95833  
SACRAMENTO, CA 95833

Name of Alien: ROBERTO RODRIGUEZ, GUATEMALA

Date of Birth: [REDACTED] Citizenship: [REDACTED] Sex: M

- ☐ A final order of removal against the alien;  
☒ The pendency of ongoing removal proceedings against the alien;  
☒ Biometric confirmation of the alien's identity and a records check of federal databases that affirmatively indicate, by themselves or in addition to other reliable information, that the alien either lacks immigration status or notwithstanding such status is removable under U.S. immigration law; and/or  
☐ Statements made by the alien to an immigration officer and/or other reliable evidence that affirmatively indicate the alien either lacks immigration status or notwithstanding such status is removable under U.S. immigration law.

- ☐ Upon completion of the proceeding or investigation for which the alien was transferred to your custody, DHS intends to resume custody of the alien to complete processing and/or make an admissibility determination.

IT IS THEREFORE REQUESTED THAT YOU:

- Notify DHS as early as practicable (at least 48 hours, if possible) before the alien is released from your custody. Please notify DHS by calling ☒ U.S. Immigration and Customs Enforcement (ICE) or U.S. Customs and Border Protection (CBP) at 800-371-2867. If you cannot reach an official at the number(s) provided, please contact the Law Enforcement Support Center at (802) 872-6020.  
• Maintain custody of the alien for a period **NOT TO EXCEED 48 HOURS** beyond the time when he/she would otherwise have been released from your custody to allow DHS to assume custody. The alien must be served with a copy of this form for the detainer to take effect. This detainer arises from DHS authorities and should not impact decisions about the alien's bail, rehabilitation, parole, release, diversion, custody classification, work, quarter assignments, or other matters.  
• Relay this detainer to any other law enforcement agency to which you transfer custody of the alien.  
• Notify this office in the event of the alien's death, hospitalization or transfer to another institution.

- ☐ If checked: please cancel the detainer related to this alien previously submitted to you on [REDACTED] (date).

VICTOR E. BARTON - DO  
(Name and Title of Immigration Officer)

Vicente A. Barton  
(Signature of Immigration Officer) (Sign in ink)

Notice: If the alien may be the victim of a crime or you want the alien to remain in the United States for a law enforcement purpose, notify the ICE Law Enforcement Support Center at (802) 872-6020. You may also call this number if you have any other questions or concerns about this matter.

TO BE COMPLETED BY THE LAW ENFORCEMENT AGENCY CURRENTLY HOLDING THE ALIEN WHO IS THE SUBJECT OF THIS NOTICE:

Please provide the information below, sign, and return to DHS by mailing, emailing or faxing a copy to [REDACTED]

Local Booking/Inmate #: [REDACTED] Estimated release date/time: [REDACTED]

Date of latest criminal charge/conviction: [REDACTED] Last offense charged/conviction: [REDACTED]

This form was served upon the alien on [REDACTED] in the following manner:

- ☐ In person ☐ by inmate mail delivery ☐ other (please specify): [REDACTED]

[REDACTED]  
(Name and Title of Officer)

[REDACTED]  
(Signature of Officer) (Sign in ink)

**U.S. DEPARTMENT OF HOMELAND SECURITY**

**Warrant for Arrest of Alien**

File No. [REDACTED]

Date: 02/10/2018

**To:** Any immigration officer authorized pursuant to sections 236 and 287 of the Immigration and Nationality Act and part 287 of title 8, Code of Federal Regulations, to serve warrants of arrest for immigration violations

I have determined that there is probable cause to believe that HERNANDEZ ARGUETA, GERMAN is removable from the United States. This determination is based upon:

- ☐ the execution of a charging document to initiate removal proceedings against the subject;
- ☒ the pendency of ongoing removal proceedings against the subject;
- ☐ the failure to establish admissibility subsequent to deferred inspection;
- ☒ biometric confirmation of the subject's identity and a records check of federal databases that affirmatively indicate, by themselves or in addition to other reliable information, that the subject either lacks immigration status or notwithstanding such status is removable under U.S. immigration law; and/or
- ☐ statements made voluntarily by the subject to an immigration officer and/or other reliable evidence that affirmatively indicate the subject either lacks immigration status or notwithstanding such status is removable under U.S. immigration law.

**YOU ARE COMMANDED** to arrest and take into custody for removal proceedings under the Immigration and Nationality Act, the above-named alien.

  
(Signature of Authorized Immigration Officer)

**GRIS HENDERSON - SDDO**

(Printed Name and Title of Authorized Immigration Officer)

**Certificate of Service**

I hereby certify that the Warrant for Arrest of Alien was served by me at \_\_\_\_\_  
(Location)  
on HERNANDEZ ARGUETA, GERMAN on \_\_\_\_\_, and the contents of this  
(Name of Alien) (Date of Service)  
notice were read to him or her in the \_\_\_\_\_ language.  
(Language)

\_\_\_\_\_  
Name and Signature of Officer

\_\_\_\_\_  
Name or Number of Interpreter (if applicable)

Form I-300 (Rev. 02/16)



## ORDER TO DETAIN OR RELEASE ALIEN

TO: (NAME and TITLE of Person in Charge of Facility)

WARDEN

(Name of Facility)

Suffolk County Jail

Please ☒ Detain ☐ Release

Date 3/30/2018

Time: 1537

Name of Alien RAMOS HERNANDEZ, JONATHAN

File Number

A

Age  
23

Date of Birth (mo./Day/Yr.)

Sex  
MNationality  
El SalvadorForeign Address  
El Salvador

Nature of Proceedings

REMOVAL

Signature of Officer Receiving Alien

*[Signature]* 2019

## REMARKS:

Please place the subject in an ICE bed and hold there until his release to ICE on Monday, April 2, 2018 at 0500 hours.

PIN: 730466

NYSID:

FBI: 8NE7KJ05K

Signature of Officer Authorizing Action

Title

DO

Office

CAPLI

Form I-205 (Rev. 08/31/07)

UNITED STATES DEPARTMENT OF HOMELAND SECURITY

# COUNTY OF SUFFOLK



ICE  
Medical  
You close? Notified

SHERIFF'S OFFICE

ERROL TOULON, JR.  
SHERIFF

TO: **ICE**

ATTENTION: **DETENTION AND REMOVAL**

FROM: **SUFFOLK COUNTY JAIL RECORDS**

AS OF **3/30/2018** THE FOLLOWING INDIVIDUALS ARE BEING HELD ON YOUR DETAINER ONLY AND NO LONGER HAVE CHARGES IN SUFFOLK COUNTY. PLEASE CONTACT THIS OFFICE WITH ARRANGEMENTS FOR A PICK-UP NO LATER THAN 48 HOURS OF THIS NOTIFICATION (EXCLUDING SATURDAYS SUNDAYS AND FEDERAL HOLIDAYS) AT: (631) 852-2247, FAX (631) 852-1983

PIN	NAME	DOB	NYSID	FBI#	FILE#
730468	HERNANDEZARGUETA, GERMAN			8NE7KJ06K	

Sgt. Kevin Brady # S225

\*\*\*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\*\*\*

**FARM**

ISLIP 1ST DISTRICT

Room: D43

Date: 03/30/18

Page 01 of 01

**ORDER TO REMAND & PRODUCE DEFENDANT  
FOR COURT APPEARANCE CPL 510.10**

HERNANDEZARGUETA, GERMAN

DOB: [REDACTED]

MALE

PIN: 730466

NYSID: [REDACTED]

SSN: [REDACTED]

RES : WHM  
Age : 23  
Hght: 508  
Wght: 135  
Hair: BLK  
Eyes: BRO



	Count-Statute	Docket No.	Current Bond Bail	Changed Bond bail	Date
1	PL 190.23	18-10559	1000 500		3-30-18
2	PL 265.01 05				
3					
4					
5					
6					
7					
8					
9					
10					

RETURN TO COURT ON: \_\_\_\_\_

HOLDS:

INS DETAINER

ROOM: D43

**DISPOSITION**

COUNT:

1	ACD55 733118	6	
2	ACD55 733118	7	
3		8	
4		9	
5		10	

DATED: 3-30-18

District Court Judge [Signature]

C.P.L. 380.60

**CERTIFICATE OF CONVICTION**

The above named defendant having been convicted of the offense listed below, it is ORDERED that the defendant be committed to the Suffolk County Correctional Facility for a term listed below, pursuant to section 380.60 C.P.L., and the defendant be remanded to the custody of the Sheriff.

COUNT:

1		6	
2		7	
3		8	
4		9	
5		10	

DATED: \_\_\_\_\_

District Court Judge

\*\*\*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\*\*\*

DC-111 Remand Order

311300



\*\*\*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\*\*\*

ISLIP 1ST DISTRICT

Room: D43

Date: 03/16/18

Page 01 of 01

ORDER TO REMAND & PRODUCE DEFENDANT  
FOR COURT APPEARANCE CPL 510.10

RES : WHM  
Age : 23  
Hght: 508  
Wght: 135  
Hair: BLK  
Eyes: BRO

HERNANDEZARGUETA, GERMAN

DOB: [REDACTED]

MALE

PIN: 730466

NYSID: [REDACTED]

SSN: [REDACTED]

**FARM**

	Count-Statute	Docket No.	Current Bond Bail	Changed Bond Bail	Date
1	PL 190.23	18-10559	1000 500	PC	
2	PL 265.01 05			D	
3					
4					
5					
6					
7					
8					
9					
10					

RETURN TO COURT ON: 3/30/18

HOLDS:

INS DETAINER

ROOM: D43

2018 MAR 16 PM 12:06  
S  
FAC

DISPOSITION

COUNT:

1		6	
2		7	
3		8	
4		9	
5		10	

DATED: 3/16/18

District Court Judge 93

C.P.L. 380.60

CERTIFICATE OF CONVICTION

The above named defendant having been convicted of the offense listed below, it is ORDERED that the defendant be committed to the Suffolk County Correctional Facility for a term listed below, pursuant to section 380.60 C.P.L., and the defendant be remanded to the custody of the Sheriff.

COUNT:

1		6	
2		7	
3		8	
4		9	
5		10	

DATED:

District Court Judge

\*\*\*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\* HOLDS \*\*\*\*\*

DC-111 Remand Order

31X300

DC-111

ORDER TO REMAND AND PRODUCE DEFENDANT  
FOR COURT APPEARANCE  
C.P.L. 510.10

2111100

1ST DISTRICT

TO: WARDEN OF SUFFOLK COUNTY JAIL

Date: 03/10/18  
Room: H

PIN: 730466 Name: HERNANDEZARGUETA, GERMAN  
NYS: [REDACTED]

DOB: [REDACTED] MALE

	Count-Statute	Docket No.	Current		Changed		Date
			Bond	Bail	Bond	Bail	
1	PL 190.23	18/10559	1000	500			MAR 10 2018
2	PL 265.01 05						
3							
4							
5							
6							
7							
8							
9							
10							

RETURN TO COURT ON: 3-16-18

ROOM NO. 243  
MAR 10 2018

HOLDS:

DISPOSITION

COUNT:

1		6	
2		7	
3		8	
4		9	
5		10	

DATED: MAR 10 2018

[Signature]  
(District Court Judge) 79

C.P.L. 380.60

CERTIFICATE OF CONVICTION

The above named defendant having been convicted of the offense listed below, it is ORDERED that the defendant be committed to the Suffolk County Correctional Facility for a term listed below, pursuant to section 380.60 C.P.L., and the defendant be remanded to the custody of the Sheriff.

COUNT:

1		6	
2		7	
3		8	
4		9	
5		10	

DATED: \_\_\_\_\_

(District Court Judge)

SUFFOLK COUNTY CORRECTIONAL FACILITY  
PRE-RELEASE WARRANT CHECK

71410

Date: 03/30/18

Location: YP3N002

Inmate Account: \$ 265.35

Name: HERNANDEZARGUETA, GERMAN  
IN DATE: 03/10/18 Race: W  
BCI: Y4954 NYSID: [REDACTED]

Pin: 730466  
Eth: H Sex: M  
FBI: 8NE7KJ06K

Classification: AMMIS  
DOB: [REDACTED] Age: 23  
SSN: [REDACTED]

Personal: Height: 508 Weight: 135  
Hair Color: BLK Eye Color: BRO  
Marital Status: S Dependents: 00  
Last Grade Completed: 08 Birthplace: EL

Scars Marks & Tattoos: NONE

Aliases:  
HERNANDEZARGUETA, GERMAN X SAME

Address:

Emergency Contact: OMAR CASTENEDA

Contact:

Relationship: COU

Phone: [REDACTED]

*NO LOCALS*

AS OF 03/30/18 DNA TEST REQUIRED BEFORE DISCHARGE

*faxed*



**eJusticeNY** INTEGRATED JUSTICE PORTAL[People](#) > [Wanted](#) > [Search](#) [\(-\) Feedback](#)**Wanted/Missing Search**

<b>Request Data</b>	- Name: HERNANDEZARGUETA, GERMAN Sex: Male Birth Date (DOB): [REDACTED] Race (RAC): Unknown
---------------------	---

**i** No DCIS Suspects have been found based on the search criteria entered.

**NCIC Response:**

ILQ11234567891011

NY051013C

NO NCIC WANT NAM/HERNANDEZARGUETA, GERMAN DOB/[REDACTED] RAC/U SEX/M  
\*\*\*MESSAGE KEY QWA SEARCHES ALL NCIC PERSONS FILES WITHOUT LIMITATIONS.

**DONE**[About](#) | [Site Map](#) | [Site Policies](#) |

March 30, 2015 3:21 PM EDT

SUFFOLK COUNTY SHERIFF  
DISCHARGE FUNDS REPORT

1781200

DATE: 04/01/18

INMATE: 730466 HERNANDEZARGUETA, GERMAN

DATE	OLD BALANCE	AMOUNT	DB CR	NEW BALANCE	TRANSACTION
03/10/18	0.00	0.00	OP	0.00	ENTRY
03/10/18	0.00	453.00	CR	453.00	YAP ADMISS
03/15/18	453.00	30.00	PU	423.00	COMMISSARY ORDER
03/20/18	423.00	49.90	PU	373.10	COMMISSARY ORDER
03/22/18	373.10	49.85	PU	323.25	COMMISSARY ORDER
03/27/18	323.25	18.75	PU	304.50	COMMISSARY ORDER
03/29/18	304.50	39.15	PU	265.35	COMMISSARY ORDER
04/01/18	265.35	265.35	CL	0.00	ISSUED MONEY

04/01/18

\$265.35 CLOSED DUE TO INMATE

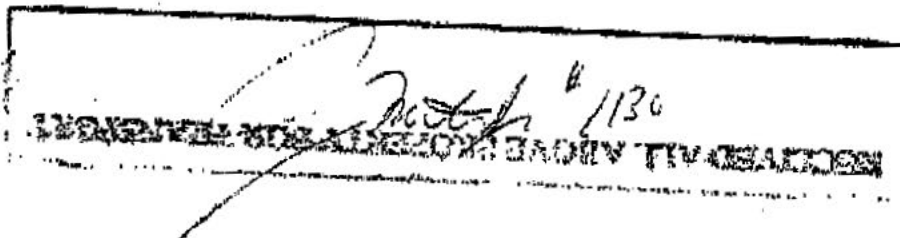
Inmate Signature: [Signature]

Date: \_\_\_\_\_

Officer: [Signature] ISSUED MONEY

Date: \_\_\_\_\_

CH# 401373



6617647

PIN # 730466

## SUFFOLK COUNTY CORRECTIONAL FACILITY

## INMATE CLOTHING AND PROPERTY INVENTORY

NAME: Hernandez Argueta, German D.O.B. [REDACTED]  
 CLOTHING NUMBER: 397T #1257 DATE OF ENTRY: 03/10/18

THIS IS TO ACKNOWLEDGE RECEIPT OF THE FOLLOWING PROPERTY:

WALLET/CONTENTS	POCKETBOOK/PURSE	KEYS <u>(3)</u>	HAT/CAP
	WATCH	BRAACELET	GLASSES
MEDALS	BELT <u>Brown</u>	EARRING(S)	RING(S) <u>On metal w/ stone</u>
NECKLACE	MONEY (SPECIFY AMOUNT, RECEIPT #, OR NO FUNDS. IF NO FUNDS, HAVE INMATE SIGN BELOW.) <u>\$170.00</u> <u>\$453</u> <u>coins in property</u>		
LOTTERY - C.T.B. TICKETS	RARE/FOREIGN CURRENCY		
DRIVERS LICENSE/D. + NO.	CELL PHONE(S) / CHARGER(S) <u>Black</u>		
SOC. SECURITY/BENEFIT CARDS + NO.	CREDIT/DEBIT CARDS NAME + NOS.		
BIRTH CERT./PASSPORT			
MISC <u>Papers</u>			
SHIRT <u>Black</u>	CLOTHES REMITTED AND REC'D.		
PANTS/SHORTS <u>gray</u>			
SHOES/SNEAKERS/BOOTS <u>Black</u>			
COAT <u>Black</u>			
SUIT			
DRESS/SKIRT			

CHECK ☒ THIS BOX AND LIST PROPERTY(S) AND LOCATION IF STORED OTHER THAN IN ENVELOPE, SPECIFY MEDS - LG. ITEMS - ETC.

<input type="checkbox"/> PLACE RED "X" IN BOX	NO PROPERTY RECEIVED		I HAVE RECEIVED A TELEPHONE CALL THE S.C.C.F. INMATE RULES & REGULATIONS BOOKLET AND ADMISSION KIT.
X <u>Wagner</u>	1225	<u>[Signature]</u>	
RECEIVING OFFICER'S SIGNATURE	SHIELD NO.	I CERTIFY THE ABOVE INFORMATION TO BE CORRECT, I RELEASE THE S.C.C.F. OF ALL RESPONSIBILITY FOR MY PERSONAL PROPERTY LEFT OVER 30 DAYS FROM MY RELEASE.	
<u>[Signature]</u> 1485	SHIELD NO.	X <u>[Signature]</u>	
SIGNATURE OF DISCHARGING C.O. & DATE	SHIELD NO.	I HAVE RECEIVED ALL PROPERTY BEING HELD FOR ME AT THE S.C.C.F. (INMATE SIGNATURE)	

DISTRIBUTION: WHITE - PROPERTY

YELLOW - OFFICE

PINK - INMATE

CF-34 Revised 12/11

25 0106P 12/11/11



CC: 18-0154841/SPD ARREST: 006754-18 PIN: 730466

POLICE DEPARTMENT, COUNTY OF SUFFOLK NY  
ACCREDITED LAW ENFORCEMENT AGENCY  
ARREST REPORT PDC5-10450

LAST NAME, FIRST MI: HERNANDEZARGUETA, GERMAN E

ARREST	DATE OF ARREST 03/09/18	TIME OF ARREST 2115	ARREST TYPE SIGHT (SUMMARY)		LOCATION OF ARREST ( ) INSIDE (X) OUTSIDE C/O BROADWAY AND SHERIDAN ST, BRENTWOOD						
	INCIDENT LOCATION: C/O BROADWAY AND SHERIDAN ST BRENTWOOD, ISLIP				OCURRED: (X) ON ( ) BETWEEN	DATE: 03/09/18	TO DATE:				
	ARRESTING OFFICER: ESCALONA, ROBERT				PIO # 30635	SHIELD 4344	RANK PO	COMMAND 0320			
	FINGER PRINTED: (X) YES ( ) NO		PHOTOGRAPHED: (X) YES ( ) NO		WEAPON (DESCRIBE)						
ARRESTEE	CT 001	LAW PL	ART 190.23	AIR 05	CLASS B	DEG 0	CAT M	DESCRIPTION FALSE PERSONATION CRIM POSS WEAP-4TH NOT CITIZEN	ATT. COMP. X		
	002	PL	265.01		A	4	M		X		
	LAST NAME HERNANDEZARGUETA		FIRST GERMAN		MI E	NICKNAME / ALIAS			DATE OF BIRTH		
	ADDRESS		CITY	STATE	ZIP	MYSID		SOCIAL SECURITY #			
	HOME PHONE		CELL PHONE	CELL CARRIER	EMAIL ADDRESS						
	MARITAL STATUS SINGLE		MOTHER'S MAIDEN NAME AGUETA AMAYA		CITIZENSHIP EL	RESIDENCY STATUS Non-Resident		IMMIGRATION STATUS ILLEGAL ALIEN			
	BIRTHPLACE: CITY		COUNTY	STATE	COUNTRY	MILITARY SERVICE					
	SEX M	RACE/ETHNICITY WHITE HISPANIC		HEIGHT 506	WEIGHT 135	EYE COLOR BLK	EYE DEFECTS NOR	HAIR COLOR BLK	HAIR LENGTH / STYLE CLL STR		
	BUILD THN	COMPLEXION YEL	L/R HANDED R	SPEECH NOR	CLOTHING DIRTY/SLOPPY/TORN		MUST/BEARD NOR	VISBLE SCARS/MOLES NON NON	AMPUTATION		
	LANGUAGE SPA		TRANSLATOR UTILIZED ( ) YES (X) NO		GANG MEMBER ( ) YES (X) NO	GANG NAME		STREET NAME			
TATTOO (DESCRIBE)											
EMPLOYMENT	EMPLOYER UNEMPLOYED							PHONE NUMBER			
	BUSINESS ADDRESS							CITY	STATE	ZIP	GOVERNMENT ENTRY ( ) YES ( ) NO
	OCCUPATION							COLLECTING UNEMPLOYMENT ( ) YES ( ) NO		DISABILITY BENEFITS ( ) YES ( ) NO	
VEHICLE	VIN #		PLATE #	STATE	YEAR	MAKE	MODEL	COLOR			
	LICENSE #		DISPOSITION			VIOLATION(S)					
DWI	DWI TEST TYPE:		COURT ORDERED: ( ) YES ( ) NO		TEST DATE:		TEST TIME:		TEST KIT NUMBER:		
	TEST ADMINISTERED BY:						TEST LOCATION:				

## BRIEF DETAILS OF OFFENSE:

THE DEFENDANT, AT C/O BROADWAY AND SHERIDAN ST, BRENTWOOD, IN THE TOWN OF ISLIP, SUFFOLK COUNTY, NEW YORK, ON OR ABOUT MARCH 9, 2018, AT APPROXIMATELY 9:10 P.M., AFTER BEING INFORMED OF THE CONSEQUENCES OF SUCH ACT, KNOWINGLY MISREPRESENTED HIS OR HER ACTUAL NAME, DATE OF BIRTH OR ADDRESS TO A POLICE OFFICER OR PEACE OFFICER WITH INTENT TO PREVENT SUCH POLICE OFFICER OR PEACE OFFICER FROM ASCERTAINING SUCH INFORMATION; IN THAT, THE DEFENDANT IDENTIFY HIMSELF AS ERICK HERNANDEZ D.O.B. [REDACTED] AFTER BEING ADVISED OF THE CONSEQUENCES OF MISREPRESENTING HIMSELF TO THE POLICE, THE DEFENDANT WAS EVENTUALLY IDENTIFIED AS GERMAN HERNANDEZ-ARGUETA [REDACTED] VIA THUMBPRINT SCAN AT SRD PCT.

REPORTING OFFICER NAME  
ESCALONA, ROBERTRANK  
PO  
SHIELD  
4344  
COMMAND  
0320  
PCT  
03  
SECTION  
318

SHERIFF

PRINT DATE: 03/09/18 PRINT TIME: 22:47:49

DATE: 03/10/18

SUFFOLK COUNTY CORRECTIONAL FACILITY

BOOKING SHEET RECEIPT  
FOR:

Name: HERNANDEZARGUETA, GERMAN Pin: 730466 Classification: AMMIS  
Race: W Eth: H Sex: M DOB: [REDACTED] Age: 23 Indate: 03/10/18  
BCI: Y4954 NYSID: [REDACTED] FBI: 8NE7KJ06K SSN: [REDACTED]

PERSONAL: Height: 508 Weight: 135 US Citizen: N  
Hair Color: BLK Eye Color: BRO Religion: CAT  
Marital Status: S Dependents: 00 Suff Res: 02 YRS  
Education (Last Grade Completed): 08 Read/Write (Y/N): Y  
Occupation: LB Emp Status: FUL Veteran: N  
SSN: [REDACTED] Birthplace(St): EL SCCF: N

DEPENDENCIES: Liquor (Y/N): Y Drugs (Y/N): N

ADDRESS: SNU: [REDACTED] SNA: [REDACTED] State: [REDACTED] APT: [REDACTED]  
City: [REDACTED] Zip: [REDACTED]

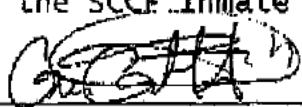
Next of Kin Name: OMAR CASTENEDA  
/ Guardian: SNU: SAME SNA: [REDACTED] APT: [REDACTED]  
or City: [REDACTED] State: [REDACTED] Zip: 00000  
Emerg Contact Phone: [REDACTED] PTC: COU

REMAND CHARGE:	Law	Art/Sect	Sub	CJ	Description
PL		190.23		BMO	FALSE PERSONATION

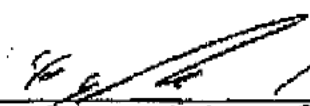
I realize that the law reads that I may receive up to 1/3rd of my sentence off for good behavior and willing performance of duties assigned; however, it rests entirely within the province of the Sheriff to determine whether or not I may have earned a commutation of my sentence. Good time is not reviewable if made in accordance with the law.

I also hereby authorize the Sheriff of Suffolk County or his authorized representative to open and examine all mail and packages which may be directed to me as long as I am a prisoner in the Suffolk County Correctional Facility.

I have also received a Telephone Call, the SCCF Inmate Rules and Regulations Booklet and Admissions Kit.

  
Signature of Prisoner

Witnessed on 03/10/18 at the Suffolk County Correctional Facility,  
Riverhead, New York.

  
Receiving Officer

DATE: 03/10/18

SUFFOLK COUNTY CORRECTIONAL FACILITY

BOOKING SHEET RECEIPT  
FOR

Name: HERNANDEZARGUETA, GERMAN Pin: 730466 Classification: AMMIS  
Race: W Eth: H Sex: M DOB: [REDACTED] Age: 23 Indate: 03/10/18  
BCI: Y4954 NYSID: [REDACTED] FBI: 8NE7KJ06K

SCARS, MARKS, TATTOOS AND DEFORMITIES

CODE . . DESCRIPTION

\*\*\*\*\* NONE \*\*\*\*\*

RT THUMB PRINT (Admit)



RT THUMB PRINT (Discharge)



A handwritten signature in black ink, appearing to be "C. Hernandez".

Signature of Inmate

A handwritten signature in black ink, appearing to be "C. L. [unclear] 1985".

Discharging Officer



.DATE 30 MAR 18 15:24:25 REPORT GENERATION BRADYKEV  
S U F F O L K C O U N T Y S H E R I F F  
Record Room - Inmate Incarceration Card Report

521410

Name : HERNANDEZARGUETA,GERMAN

DOB : [REDACTED]

RES: WHM

Address: [REDACTED]

Apt# [REDACTED]

PIN : 730466

BCI : Y4954

*Date	.A.	.Court/Dckt.	Bail/Sentence	.DisRw.F			
*MMDDYY	.Class	.BPL	.C.Charge Description	.Warrant No.	Comments	.MMDDYY	.C
070317	AMMIS	733509	C FALSE PERSONATION	17-26740	500	081817	R
081817	AMWAR	742003	C FOA WARRANT	A212948247	FOA WARRANT	081817	D
031018	AMMIS	812106	C FALSE PERSONATION	18-10559	500	033018	R
033018	AMWAR	815516	C FOA WARRANT	212948247	FOA WARRANT		R

..... END REPORT .....